DECLARATION and POWER OF ATTORNEY

10A 3540

As a b	elow named inventor, I declare	that the information given herein is true, that I	<u>.</u> [☐ ORIGINAL ☐ CONTINUATION ☐ DIVISIONAL t and sole inventor (if only one name is listed as 1 belon		
or an o	original, first and joint inventor (if	f plural names are listed below) of the subject SHOCK nereto unless the following box is checked:	matter which is claimed and for wind ABSORBER	hich a patent is sought on the invention entitled:		
	and was amended on		iber or PCT International Applicati	tion Number		
I ackno I hereb I hereb	idence, post office address and owledge my duty to disclose info by state that I have reviewed and by claim foreign priority benefits	citizenship are as stated below next to my na ormation which is material to the patentability of d understand the contents of the above identifi under Title 35, United States Code, § 119 of a n for patent or inventor's certificate having a fil	of this application in accordance we led specification, including the clai any foreign application(s) for paten ing date before that of the applicat	with Title 37, Code of Federal Regulations § 1.56(a). aims, as amended by any amendment referred to above nt or inventor's certificate listed below and have also ation on which priority is claimed:		
		PRIUR FURE	IGN APPLICATION(S) DATE OF FILING			
	COUNTRY	APPLICATION NUMBER	Month Day Year			
	Japan	2003-053882	February 28, 20	003 Yes		
listed b	pelow and, insofar as the subjected by the first paragraph of 35 L	at matter of each of the claims of this application	on is not disclosed in the prior Unit information which is material to p	application designating the United States of America, ted States or PCT international application in the mann patentability as defined in 37 C.F.R. 1.56 which became ation.		
(Application Serial No.) (Fi			iling Date)	(Status)		
Trader	mark Office connected therewith	ed Inventor, I hereby appoint the following regis	= :	this application and transact all business in the Patent		
	d correspondence to:	KODA & ANDROLIA 2029 Century Park East. Suite 1430 Los Angeles, CA 90067-3024	DIRECT TELEPHONE CAL	LLS TO: KODA & ANDROLIA 310-277-1391		
(Please	e Print)					
	Name of Inventor		Residence: CITY	STATE or COUNTRY		
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3	Post Office Address			CITIZENS		
	Name of Inventor		Residence: CITY	STATE or COUNTRY		
4	Post Office Address			CITIZENS		
these s	statements were made with the	ade herein of my own knowledge are true and knowledge that willful false statements and th jeopardize the validity of the application or any	e like so made are punishable by t	Imation and belief are believed to be true; and further the fine or imprisonment, or both, under 18 U.S.C. 1001 a		
SIGN	NATURE OF INVENTOR 1	Koji Shimotsu AN. 17. 2004	SIGNATURE OF INVENTO	SIGNATURE OF INVENTOR 2		
DATE JAN. 17. 2004			DATE			
SIGN	NATURE OF INVENTOR 3		SIGNATURE OF INVENTO	SIGNATURE OF INVENTOR 4		
DAT	E		DATE	DATE		